Cas	e 6:23-bk-1344			/23 Entered Page 1 of 50		23 22:30):13	Desc
Fill in this inform	nation to identify your							
Debtor 1	Robert	Scott	Anderson					
	First Name	Middle Name	Last Name		_			
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Ba	inkruptcy Court for the:	Central	District of	California				
Case number	6:23-bk-13446-SY				_			Check if this is an amended filing
Official For	<u>rm 106A/B</u> e A/B: Prop	oertv						12/15
Jenedali	C A/D, FIU	or ty						12/15
1. Do you ow ✓ No. Go							Tiller	est iii
Yes. vvr	nere is the property?	18 77 - 4 1 - 41	4.00					
1.1	et address, if available, o	☐ Single-	ne property? Check all the family home cor multi-unit building	hat apply.	the amou	nt of any secui	red claim	exemptions. Put s on Schedule D: ured by Property.
desci	ription	☐ Manufa ☐ Land	minium or cooperative actured or mobile home ment property)	Current va			ent value of the on you own?
City	State ZII	Code Timesl	nare		(such as fo	•		nership interest the entireties, or
Coun	ty		an interest in the prop	erty? Check one.	a ille estat	e), ii kilowii.		
			•	d another	_	if this is com structions)	munity p	property
			ormation you wish to a dentification number:		, such as le	ocal		

Part 2:

2.

Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages

you have attached for Part 1. Write that number here

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

■ No

√ Yes

\$0.00

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Debtor Anderson, Robert Scott Case number (if known) 6:23-bk-13446-SY

	3.1	Make:	Honda	Who has an interest in the property? Check one.	Do not deduct secured c	aims or exemptions. Put
		Model:	Civic	☑ Debtor 1 only		ed claims on Schedule D:
		Wodol.		Debtor 2 only Debtor 1 and Debtor 2 only	Creditors with have Class	ims Secured by Property.
		Year:	2022	At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		Approximate mileage:	50500	Check if this is community property (see	\$21,500.00	\$21,500.00
		Other information:		instructions)		
4.	Wate	ercraft, aircraft, motor h	nomes, ATVs a	and other recreational vehicles, other vehicles, and	accessories	
	Exar	mples: Boats, trailers, mo	tors, personal	watercraft, fishing vessels, snowmobiles, motorcycle a	ccessories	
	₫ №	No				
	☐ Y	/es				
	4.1	Make:		Who has an interest in the property? Check one. Debtor 1 only		aims or exemptions. Put ed claims on <i>Schedule D:</i>
		Model:		Debtor 2 only		ims Secured by Property.
		Year:		Debtor 1 and Debtor 2 only	Current value of the	Current value of the
		Other information:		☐ At least one of the debtors and another	entire property?	portion you own?
				Check if this is community property (see		
				instructions)		
				•		
5.				wn for all of your entries from Part 2, including any		\$21,500.00
	you	nave attached for Part	2. Write that r	number here		
Pa	rt 3:	Describe Your	Personal	and Household Items		
ро у	ou ow	n or have any legal or	equitable inte	rest in any of the following items?		Current value of the portion you own?
						Do not deduct secured
						claims or exemptions.
6.		sehold goods and furn	-			
	Exar	mples: Major appliances	, furniture, line	ens, china, kitchenware		
		No				
	√ Y	es. Describe	Household god	ods and furnishings		\$1,500.00
7.	Elec	tronics				
	Exar	mples: Televisions and r	adios; audio, v	video, stereo, and digital equipment; computers, printer	s, scanners; music	
		collections; elect	ronic devices i	ncluding cell phones, cameras, media players, games		
	□ N	No				
	₫ Y	es. Describe	Electronics			\$700.00

Debtor Anderson, Robert Scott

8.	Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	☑ No	
	Yes. Describe	
9.	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	□ No	
	✓ Yes. Describe Fitness equipment	\$300.00
10.	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	□ No	
	✓ Yes. Describe Handguns	\$600.00
11.	Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No	
	✓ Yes. Describe Clothes	\$400.00
12.	Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	☑ No	
	Yes. Describe	
13.	Non-farm animals	
	Examples: Dogs, cats, birds, horses	
	□ No	
	✓ Yes. Describe	unknown
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	☑ No	
	Yes. Give specific information	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$3,500.00
Pai	tt 4: Describe Your Financial Assets	
	ou own or have any legal or equitable Current value of the portion you own? est in any of the following? Do not deduct secured claims or exemptions.	

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Debtor Anderson, Robert Scott

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16.	Cash Examples: Money you	u have in your wallet, in your ho	ome, in a safe deposit box, and on hand when y	you file your petition	
	☐ No ☑ Yes			. Cash:	\$0.00
17.			ounts; certificates of deposit; shares in credit ur multiple accounts with the same institution, list		
	☐ No				
	√ Yes		Institution name:		
		17.1. Checking account:	SchoolsFirst FCU		\$42.00
		17.2. Savings account:	SchoolsFirst FCU		\$1,000.00
18.	Examples: Bond funds ✓ No	, or publicly traded stocks s, investment accounts with br Institution or issuer name:	okerage firms, money market accounts		
19.	Non-publicly traded s LLC, partnership, and ✓ No		orated and unincorporated businesses, incl	uding an interest in an	
	Yes. Give specific information about them	Name of entity:		% of ownership:	
20.	Negotiable instruments	s include personal checks, cash	ntiable and non-negotiable instruments niers' checks, promissory notes, and money ord nsfer to someone by signing or delivering them.		

Debtor Anderson, Robert Scott

21.	Retirement or pension Examples: Interests in		01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	☐ No			
	✓ Yes. List each			
	account separately.	Type of account:	Institution name:	
		Retirement account:	CalPERS	\$11,163.00
22.	Security deposits and	prepayments		
	Your share of all unused	d deposits you have ma	ade so that you may continue service or use from a company	
	Examples: Agreement others	s with landlords, prepai	id rent, public utilities (electric, gas, water), telecommunications companies, or	
	√ No			
	☐ Yes	I	institution name or individual:	
		Electric:		·
		Gas:		
		Heating oil:		
		Security deposit on re	ental unit:	·
		Prepaid rent:		
		Telephone:		-
		Water:		·
		Rented furniture:		·
		Other:		
23.	Annuities (A contract for	or a periodic payment o	of money to you, either for life or for a number of years)	
25.	✓ No	or a periodic payment c	of money to you, entire for the or for a number of years)	
	Yes	Issuer name and desc	cription:	
	_			
24.	Interests in an education 26 U.S.C. §§ 530(b)(1),		t in a qualified ABLE program, or under a qualified state tuition program.	
	☑ No		,	
	_	Institution name and o	description. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, equitable or fu	iture interests in prop	erty (other than anything listed in line 1), and rights or powers exercisable	
	✓ No			
	Yes. Give specific			
	information about th	nem		

Debtor Anderson, Robert Scott

26.	✓ No ☐ Yes. Give specific information about them Licenses, franchises, and other general	ites, proceeds from royalties and licensing agreements	ofessional licenses	
Mone	ey or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			
	☑ No			
	Yes. Give specific information about them, including whether you		Federal:	
	already filed the returns and the tax years		State:	
	(2)		Local:	
29.	Family support Evamples: Past due or lump sum alimon	/, spousal support, child support, maintenance, divorce settl	ement property	
	settlement	, spousar support, ornic support, maintenance, arrores setti	ement, property	
	√ No			
	Yes. Give specific information		Alimony:	
			Maintenance:	
			Support:	
			Divorce settlement:	
			Property settlement:	
30.	Other amounts someone owes you	and navments disability benefits side nav vecetion now u	vorkoro' componention	
	Social Security benefits; unpa	ance payments, disability benefits, sick pay, vacation pay, wid loans you made to someone else	vorkers compensation,	
	√ No			
	Yes. Give specific information			

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Debtor Anderson, Robert Scott Case number (if known) 6:23-bk-13446-SY

31.	Interests in insurance policies Examples: Health, disability, or life insurance	ce; health savings account (HSA); credit, h	omeowner's, or renter's insurance	
	☑ No			
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
20	American and in managements that is also your			
32.	Any interest in property that is due you for the street in property of a living trust, ex		or are currently entitled to receive	
	property because someone has died.	poor proceduc mem a me mountainee peney	, or are carronally change to receive	
	☑ No			
	Yes. Give specific information]
33.	Claims against third parties, whether or r	ant you have filed a lawcuit or made a c	domand for navment	_
55.	Examples: Accidents, employment dispute	•	demand for payment	
	✓ No	o, modiante ciamo, el mgine le cue		
	Yes. Describe each claim			1
	Tes. Describe each claim			
	L			I
34.	Other contingent and unliquidated claims claims	s of every nature, including counterclai	ims of the debtor and rights to set off	
	√ No			_
	Yes. Describe each claim			
	L			
35.	Any financial assets you did not already	list		
	☑ No			
	Yes. Give specific information]
	_			•
36.	Add the dollar value of all of your entries		_	\$12,205.00
	for Part 4. Write that number here			
Dai	t 5: Describe Any Business-F	Related Property You Own or F	lavo an Intorost In List any I	roal ostato in Dart 1
				carestate iii rart 1.
37.	Do you own or have any legal or equitable	le interest in any business-related prop	erty?	
	✓ No. Go to Part 6.			
	Yes. Go to line 38.			
				Current value of the
				portion you own? Do not deduct secured
				claims or exemptions.
38.	Accounts receivable or commissions you	u already earned		
	☑ No			
	Yes. Describe]

Debtor Anderson, Robert Scott

39.	Office equipment, furnish	nings, and	supplies		
			ers, software, modems, printers, copiers, fax machines, rugs,	telephones, desks, chairs,	
	electronic devid	ces			
	✓ No				
	Yes. Describe				
40.		oment, su	pplies you use in business, and tools of your trade		
	√ No				
	Yes. Describe				
41.	Inventory				
	√ No				
	Yes. Describe				
42.	Interests in partnerships	or joint v	entures		
	√ No				
	Yes. Describe				
	Na	ame of en	ty:	% of ownership:	
				·	
	<u>-</u>				
	_				
43.	Customer lists, mailing list	sts, or ot	ner compilations		
	√ No				
	Yes. Do your lists incl	ude pers	onally identifiable information (as defined in 11 U.S.C. § 10	1(41A)) ?	
	□ No				
	Yes. Describe.				
				_	
44.	Any business-related pro	perty you	did not already list		
	√ No				
	Yes. Give specific information				
	miormation				
	-				
					-
	_				-
	_				
	_				
45.	Add the dollar value of al	l of your	entries from Part 5, including any entries for pages you ha	ave attached	***
					\$0.00

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Debtor Anderson, Robert Scott

Pai	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an If you own or have an interest in farmland, list it in Part 1.	nterest In.
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	☑ No. Go to Part 7.	
	☐ Yes. Go to line 47.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals Examples: Livestock, poultry, farm-raised fish	
	☑ No	
	☐ Yes	
48.	Crops—either growing or harvested	
	☑ No	
	Yes. Give specific information	
49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
	☑ No	
	□ Yes	
50.	Farm and fishing supplies, chemicals, and feed	
	☑ No	
	Yes	
51.	Any farm- and commercial fishing-related property you did not already list	
	☑ No	
	Yes. Give specific information	
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00
Pai	The Test of the All Property You Own or Have an Interest in That You Did Not List Above	
53.	Do you have other property of any kind you did not already list?	
	Examples: Season tickets, country club membership	
	☑ No	
	Yes. Give specific information	
	inomatori	
	L	
54.	Add the dollar value of all of your entries from Part 7. Write that number here	\$0.00

Debtor Anderson, Robert Scott Case number (if known) 6:23-bk-13446-SY

Pa	rt 8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2		→	\$0.00
56.	Part 2: Total vehicles, line 5	\$21,500.00		
57.	Part 3: Total personal and household items, line 15	\$3,500.00		
58.	Part 4: Total financial assets, line 36	\$12,205.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$37,205.00	Copy personal property total	+ \$37,205.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$37,205.00

Cas	se 6:23-bk-1		oc 8 Filed 08 in Document		Entered 08/ 11 of 50	14/23 22:30:	:13 Desc	
Fill in this information	n to identify your ca	ase:						
Debtor 1	Robert First Name	Scott Middle Name	Anderson Last Name		_			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		_			
United States Bank	ruptcy Court for the	e: <u>C</u>	entral District of Ca	alifornia				
Case number (if known)	6:23-bk-1	3446-SY					Check if this is amended filing	
Official Form Schedule (C: The Pr	ole. If two married pe	ople are filing toge	ther, both are	e equally responsil			
property you listed on the put and attach to this prown).								
For each item of propamount as exempt. A Some exemptions—s However, if you claim property is determined.	Alternatively, you n such as those for n an exemption of ed to exceed that a	nay claim the full fair health aids, rights to 100% of fair market imount, your exemp	r market value of the preceive certain be value under a law to tion would be limited.	e property be enefits, and ta hat limits the	eing exempted up to ax-exempt retirement exemption to a parting a	to the amount of a ent funds—may b rticular dollar amo	ny applicable st e unlimited in de	tatutory limit. Iollar amount.
		claiming? Check or	•	spouse is filin	ng with you.			
4 -	•	eral nonbankruptcy		•	•			
You are clai	ming federal exem	ptions. 11 U.S.C. § 5	522(b)(2)					
2. For any proper	ty you list on <i>Sch</i> e	edule A/B that you c	laim as exempt, fill	in the informa	ation below.			

Debtor 1

Robert
First Name
Middle Name
Last Name

Case number (if known) 6:23-bk-13446-SY

Additional Page

Brief description of the property and line on Schedule A/B that lists this property

Brief description:
Fitness equipment

Schedule A/B:

9

Case number (if known) 6:23-bk-13446-SY

Amount of the exemption you claim portion you claim portion you own

Check only one box for each exemption.

Check only one box for each exemption.

\$300.00

\$300.00

C.C.P. § 703.140(b)(3)

100% of fair market value, up to any applicable statutory limit

	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description: Fitness equipment Line from Schedule A/B: 9	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(3)
Brief description: Handguns Line from Schedule A/B:10	\$600.00	\$600.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(3)
Brief description: Clothes Line from Schedule A/B:11	\$400.00	\$400.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(3)
Brief description: SchoolsFirst FCU Checking account Line from Schedule A/B: 17	\$42.00	\$42.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)
Brief description: SchoolsFirst FCU Savings account Line from Schedule A/B: 17	\$1,000.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)
Brief description: CalPERS Line from Schedule A/B: 21	\$11,163.00	\$11,163.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(10)(E)

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			Ma	ain Document	Page 13 of	50		
Fill in	n this information to	o identify your case:						
Del	otor 1	Robert First Name	Scott Middle Name	Anderson Last Name				
	otor 2 ouse, if filing)	First Name	Middle Name	Last Name				
Uni	ted States Bankrup	otcy Court for the:		Central District of Calife	ornia			
	se number nown)	6:23-bk-13446	-SY				Check if amended	
Offi	icial Form	106D						
Sc	hedule D	: Creditor:	s Who F	Have Claims	s Secured	d by Prope	erty	12/15
case in the case i	number (if known) any creditors have No. Check this bo Yes. Fill in all of th	e claims secured by	your property	ber the entries, and atta ? with your other schedule				
2.	List all secured classes are secured classes are secured to the secured to the secured to the secured classes are secured to the secured	aims. If a creditor han	one creditor ha	e secured claim, list the s a particular claim, list s in alphabetical order a	the other	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	SchoolsFirst FCU Creditor's Name Po Box 11547			the property that secunonda Civic	res the claim:	\$10,000.00	\$21,500.00	\$0.00
	Number Stree Santa Ana, CA 92 City		As of the apply.	date you file, the claim is				
	Who owes the de book ✓ Debtor 1 only	ot? Check one.	☐ Contin☐ Unliqu	_				
	Debtor 2 only		Disput					
	Debtor 1 and D At least one of the	,	√ An agı	lien. Check all that appreement you made (sucured car loan)				
	Check if this cl			ory lien (such as tax lier	ı, mechanic's			

Date debt was incurred 3/23/2023

☐ Judgment lien from a lawsuit

Other (including a right to offset)

Last 4 digits of account number ___

Add the dollar value of your entries in Column A on this page. Write that number here:

\$10,000.00

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Debtor 1 Anderson Case number (if known) 6:23-bk-13446-SY Robert Scott First Name Middle Name Last Name Column A Column B Column C Additional Page Amount of claim Unsecured Value of Part 1: After listing any entries on this page, number them beginning with collateral that portion Do not deduct the 2.3, followed by 2.4, and so forth. supports this If any value of claim collateral. Westlake Financial Services \$12,285.00 \$21.500.00 \$0.00 Describe the property that secures the claim: Creditor's Name 2022 Honda Civic PO Box 76809 Number Street As of the date you file, the claim is: Check all that Los Angeles, CA 90076-0809 apply. State ZIP Code □ Contingent Who owes the debt? Check one. **✓** Debtor 1 only Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Nature of lien. Check all that apply. At least one of the debtors and ☑ An agreement you made (such as mortgage) another or secured car loan) Check if this claim relates to a Statutory lien (such as tax lien, mechanic's community debt lien) ☐ Judgment lien from a lawsuit Date debt was incurred 4/2023 Other (including a right to offset) Last 4 digits of account number 4 7 9 8 Add the dollar value of your entries in Column A on this page. Write that number here: \$12,285.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number \$22,285.00

here:

		14h-5 Y 1)(oc 8 Filed 08/14/23 Entered	08/14/23 2	2:30:13	Desc	<u>.</u>
	to identify your case		50		2.00.10	2000	•
Debtor 1	Robert First Name	Scott Middle Name	Anderson Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankro	uptcy Court for the:	c	Central District of California				
Case number (if known)	6:23-bk-1344	16-SY				neck if this nended filir	
Official Form	106E/F						
Schedule E	F: Credit	ors Who	Have Unsecured Clair	ms			12/15
Part 1: List All of		_	page. On the top of any additional pages, wri	te your name an	a case mani	ber (II Kilo	wii).
 No. Go to Pa ✓ Yes. List all of your proclaim listed, identification amounts. As muchill out the Continuous process. 	riority unsecured cla tify what type of clair th as possible, list th uation Page of Part	aims. If a creditor m it is. If a claim h e claims in alphal 1. If more than on	has more than one priority unsecured claim, lias both priority and nonpriority amounts, list the oetical order according to the creditor's name. I be creditor holds a particular claim, list the othe	at claim here and f you have more	I show both than two pric	priority and	d nonpriority
 No. Go to Pa ✓ Yes. List all of your proclaim listed, identification amounts. As muchill out the Continuous process. 	riority unsecured cla tify what type of clair th as possible, list th uation Page of Part	aims. If a creditor m it is. If a claim h e claims in alphal 1. If more than on	has more than one priority unsecured claim, lias both priority and nonpriority amounts, list the betical order according to the creditor's name. I	at claim here and f you have more r creditors in Part Tota clain	I show both than two prior 3. Priori amou	priority and prity unsec	d nonpriority

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Robert Scott Main Abdestment Page 16 of 50 Case number (if known) 6:23-bk-13446-SY

First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. **Total claim** \$32,091.00 4.1 ALASKA FEDERAL CREDIT UNION Last 4 digits of account number 0001 Nonpriority Creditor's Name When was the debt incurred? 7/3/2021 **4000 CREDIT UNION DR** As of the date you file, the claim is: Check all that apply. Number Street Contingent **ANCHORAGE, AK 99503-6636** Unliquidated ZIP Code Disputed Who incurred the debt? Check one. ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts $\mathbf{\Lambda}$ Is the claim subject to offset? Other. Specify **☑** No Surrendered vehicle ☐ Yes \$2,286.00 4.2 **AMERICAN EXPRESS** Last 4 digits of account number 1723 Nonpriority Creditor's Name When was the debt incurred? 6/30/2021 PO BOX 297871 As of the date you file, the claim is: Check all that apply. Number Street Contingent FT LAUDERDALE, FL 33329-787 Unliquidated ZIP Code State Disputed Who incurred the debt? Check one. ☑ Debtor 1 only Type of NONPRIORITY unsecured claim:

Student loans

similar debts

Other. Specify Credit Card

Obligations arising out of a separation agreement or

divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other

Debtor 2 only

✓ No □ Yes

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

Check if this claim is for a community debt

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Robert Scott Main Angestment Page 17 of 50 Case number (if known) 6:23-bk-13446-SY

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$6.506.00 4.3 **CAPITAL ONE** Last 4 digits of account number 3982 Nonpriority Creditor's Name When was the debt incurred? 12/24/2018 PO BOX 31293 As of the date you file, the claim is: Check all that apply. Number Contingent **SALT LAKE CTY, UT 84131-0293** Unliquidated City ZIP Code Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only □ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? Other. Specify **☑** No Credit Card ☐ Yes \$459.00 4.4 Last 4 digits of account number 4791 **CAPITAL ONE** Nonpriority Creditor's Name When was the debt incurred? 10/24/2021 PO BOX 31293 As of the date you file, the claim is: Check all that apply. Number Street Contingent **SALT LAKE CTY, UT 84131-0293** ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ■ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts Is the claim subject to offset? $\mathbf{\Lambda}$ Other, Specify **☑** No **Credit Card**

☐ Yes

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First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** \$50.930.00 4.5 **OKLAHOMA STUDENT LOAN AUTHORITY** Last 4 digits of account number. Nonpriority Creditor's Name When was the debt incurred? 2018 - 2021 **525 CENTRAL PARK DR** As of the date you file, the claim is: Check all that apply. Number Street Contingent OKLAHOMA CITY, OK 73105-1723 City ZIP Code State Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other Check if this claim is for a community debt similar debts Is the claim subject to offset? Other. Specify **☑** No Educational ☐ Yes Remarks: Acct #1774, 9074, 1674, 1174, 1074, 5674, 3874, 5574 \$2,801.00 4.6 SYNCHRONY NETWORKS Last 4 digits of account number 0684 Nonpriority Creditor's Name When was the debt incurred? 2/21/2021 PO BOX 965036 As of the date you file, the claim is: Check all that apply. Number Contingent ORLANDO, FL 32896-5036 City ZIP Code Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Type of NONPRIORITY unsecured claim: ☐ Debtor 2 only □ Student loans ☐ Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other Check if this claim is for a community debt similar debts Is the claim subject to offset? Other. Specify **☑** No **Charge Account**

☐ Yes

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First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6.	Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts
	for each type of unsecured claim.

				Total claim
Total claims	6a. Domestic support obligations	6a.		\$0.00
rom Part 1	6b. Taxes and certain other debts you owe the government	6b.		\$4,100.00
	6c. Claims for death or personal injury while you were intoxicated	6c.		\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+	\$0.00
	6e. Total. Add lines 6a through 6d.	6e.		\$4,100.00
		24		Total claim
	6f. Student loans	6f.		Total claim \$50,930.00
	6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.		
	6g. Obligations arising out of a separation agreement or divorce that you did not report			\$50,930.00
Total claims from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims6h. Debts to pension or profit-sharing plans, and	6g.	+	\$50,930.00 \$0.00

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Fill in this information	n to identify your case	:		
Debtor 1	Robert	Scott	Anderson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	C	entral District of California	
Case number	6:23-bk-1344	6-SY		
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with whom	ı you ha	ve the contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	

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			Mai	in Document Pa	ige 21 of 5	50	
Fill	in this information	to identify your case:					
De	ebtor 1	Robert	Scott	Anderson			
		First Name	Middle Name	Last Name			
	ebtor 2						
(Sp	oouse, if filing)	First Name	Middle Name	Last Name			
Un	ited States Bankr	ruptcy Court for the:	C	entral District of California		_	
	se number known)	6:23-bk-13446	6-SY			u	Check if this is an amended filing
Sc		H: Your Co		debts you may have. Be as	complete and	Laccurato as nosciblo. If tu	12/15
toget in the	ther, both are equ	ally responsible for	supplying correct		is needed, co	py the Additional Page, fill	it out, and number the entrie
1.		ny codebtors? (If you	ı are filing a joint o	case, do not list either spous	e as a codebto	r.)	
	☑ No						
	Yes						
2.				ty property state or territory Texas, Washington, and Wis		property states and territor	es include Arizona, California
	☑ No. Go to lir		,	3 ,	,		
	Yes. Did you	ır spouse, former spo	use, or legal equi	valent live with you at the tim	ne?		
	□No						
	Yes. In w	hich community state	or territory did yo	ou live?	 ,	Fill in the name and current	address of that person.
	Name						
	Number	Street					
	City		State ZIP Code	9			
3.	again as a cod	ebtor only if that pers	son is a guaranto	e your spouse as a codebto r or cosigner. Make sure yo Official Form 106G). Use So	u have listed t	he creditor on Schedule D	(Official Form 106D),
	Column 1: Your o	codebtor			Col	lumn 2: The creditor to who	m you owe the debt
					C	Check all schedules that app	ly:
3.1						Schedule D, line	
_	Name					Cohodulo E/E lino	

Number

City

Street

State

ZIP Code

☐ Schedule E/F, line ______

Schedule G, line _____

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		Ma	in Document	Page 22 of 50
Fill in this information	on to identify your cas	e:		
Debtor 1	Robert First Name	Scott Middle Name	Anderson Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	Check if this is:
United States Bank	kruptcy Court for the	_	entral District of Calif	
Case number (if known)	6:23-bk-13 ²	46-SY		A supplement showing postpetition chapter 13 income as of the following dat
				MM / DD / YYYY
Official Forn	n 106l			
Schedule	I: Your Inc	ome		12/15
Be as complete and	accurate as possible	e. If two married pe	ople are filing togeth	ner (Debtor 1 and Debtor 2), both are equally responsible for supplying correc

information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment 1. Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. **☑** Employed □ Not Employed If you have more than one job, **Employment status** ☐ Employed ☐ Not Employed attach a separate page with information about additional Occupation Correctional Sergeant employers. Employer's name California Department of Corrections Include part time, seasonal, or self-employed work. **Employer's address** 14901 Central Ave Occupation may include student Number Street Number Street or homemaker, if it applies. Chino, CA 91710-9500 City Zip Code City State Zip Code How long employed there? 8 years Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll \$11,237.00 \$0.00 deductions.) If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. \$0.00 \$0.00 4. Calculate gross income. Add line 2 + line 3. \$11,237.00 \$0.00

 Debtor 1
 Robert
 Scott
 Anderson

 First Name
 Middle Name
 Last Name

		_		
			For Debtor 1	For Debtor 2 or non-filing spouse
	Copy line 4 here→	4.	\$11,237.00	\$0.00
5.	List all payroll deductions:			
	5a. Tax, Medicare, and Social Security deductions	5a.	\$125.39	\$0.00
	5b. Mandatory contributions for retirement plans	5b.	\$1,667.45	\$0.00
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00_
	5e. Insurance	5e.	\$2,223.59	\$0.00
	5f. Domestic support obligations	5f.	\$0.00	\$0.00
	5g. Union dues	5g.	\$205.47	\$0.00
	5h. Other deductions. Specify: Charitable contributions	5h. +	\$5.00	+\$0.00
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$4,226.90	\$0.00
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$7.010.10	\$0.00
8.	List all other income regularly received:			
	8a. Net income from rental property and from operating a business, profession, or farm			
	Attach a statement for each property and business showing gross			
	receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$0.00
	8b. Interest and dividends	8b.	\$0.00	\$0.00
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	0 0.	ψ0:00	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00
	8d. Unemployment compensation	8d.	\$0.00	\$0.00
	8e. Social Security	8e.	\$0.00	\$0.00
	8f. Other government assistance that you regularly receive			
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			
	Specify:	8f.	\$0.00	\$0.00
	8g. Pension or retirement income	8g.	\$0.00	<u>\$0.00</u>
	8h. Other monthly income. Specify:	8h. +	\$0.00	+\$0.00
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$0.00	\$0.00
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$7,010.10	+ \$0.00 = \$7,010.1
11.	State all other regular contributions to the expenses that you list in Scheo	dule J.		
	Include contributions from an unmarried partner, members of your household friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a		•	
	Specify:			
12.	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistics			ncome. Write that 12. \$7.010.1
				Combined monthly income
13.	Do you expect an increase or decrease within the year after you file this for	orm?		
	☐ No. ☐ Debtor has not been withholding taxes in order to increase ☐ Yes. Explain:	se his net i	ncome and make ends	meet.

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	200 0.20 BK 1	Ma	in Document	Page 24 of 50
Fill in this informati	ion to identify your ca	ase:		
Debtor 1	Robert First Name	Scott Middle Name	Anderson Last Name	Check if this is:
Debtor 2 (Spouse, if filing) United States Bar Case number (if known)	First Name nkruptcy Court for the 6:23-bk-13	<u> </u>	Last Name entral District of Californ	A supplement showing postpetition chapter 13 expenses as of the following date: MM / DD / YYYY
Official Forr	m 106J			
Schedule	J: Your E:	xpenses		12/15
space is needed, at	•	to this form. On the		ooth are equally responsible for supplying correct information. If more es, write your name and case number (if known). Answer every question
1. Is this a joint of No. Go to li		parate household?		

1.	Is this a joint case?				
	☑ No. Go to line 2.				
	Yes. Does Debtor 2 live in a sep	arate household?			
	□ _{No}				
		Official Form 106J-2, Expenses for	Separate Household of Debtor 2.		
2.	Do you have dependents?	□No	5		5
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the dependents' names.	·	Child	9	□ _{No.} ☑ _{Yes.}
			Child	11	□ _{No.} ☑ _{Yes.}
			Child	14	✓ _{No.} □ _{Yes.}
					— No. ☐ Yes.
					No. ☐ Yes.
3.	Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ _{Yes}			
Pa	art 2: Estimate Your Ongoing N	Monthly Expenses			
			using this form as a supplement in		
da	te after the bankruptcy is filed. If this	s is a supplemental <i>Schedule J</i> , ch	eck the box at the top of the form an	nd fill in the app	olicable date.
	clude expenses paid for with non-ca ch assistance and have included it o			•	Your expenses
4.	The rental or home ownership exp for the ground or lot.	enses for your residence. Include f	irst mortgage payments and any rent	4	\$2,294.00
	If not included in line 4:				
	4a. Real estate taxes			4a. _	\$0.00
	4b. Property, homeowner's, or rente	r's insurance		4b	\$0.00
	4c. Home maintenance, repair, and	upkeep expenses		4c.	\$0.00
	4d. Homeowner's association or cor	ndominium dues		4d.	\$0.00

Debtor 1 Robert Scott Anderson Case number (if known) 6:23-bk-13446-SY
First Name Middle Name Last Name

	Yo	our expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
5. Utilities:		
6a. Electricity, heat, natural gas	6a. <u>—</u>	\$200.00
6b. Water, sewer, garbage collection	6b	\$80.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$400.00
6d. Other. Specify:	6d	\$0.00
Food and housekeeping supplies	7.	\$1,000.00
. Childcare and children's education costs	8.	\$300.00
. Clothing, laundry, and dry cleaning	9	\$300.00
Personal care products and services	10.	\$100.00
Medical and dental expenses	11	\$0.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$400.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
4. Charitable contributions and religious donations	14.	\$0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		
15a. Life insurance	15a. —	\$0.00
15b. Health insurance	15b. <u> </u>	\$200.00
15c. Vehicle insurance	15c	\$120.00
15d. Other insurance. Specify:	15d	\$0.00
 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$587.75
	17b	\$0.00
17b. Car payments for Vehicle 2	17c	\$0.00
17c. Other. Specify:	17d.	\$0.00
17d. Other. Specify:		
 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 	18	\$2,250.00
9. Other payments you make to support others who do not live with you.	40	*
Specify:	19	\$0.00
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	e.	
20a. Mortgages on other property	20a. <u> </u>	\$0.00
20b. Real estate taxes	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

ebtor 1	Robert	Scott	Anderson	Case number (if know	n) 6:23-bk-13446-SY
	First Name	Middle Name	Last Name		
Other. Spe	ecify:			21. +	\$0.00
. Calculate	your monthly exp	enses.			
22a. Add l	ines 4 through 21.			22a	\$8,231.75
22b. Copy	line 22 (monthly e	expenses for Debtor 2),	f any, from Official Form 106J-2	22b	\$0.00
22c. Add li	ine 22a and 22b. T	he result is your month	y expenses.	22c	\$8,231.75
3. Calculate	your monthly net	income.			
23а. Сору	line 12 (your com	bined monthly income) t	rom Schedule I.	23a	\$7,010.10
23b. Copy	your monthly expe	enses from line 22c abo	ve.	23b. <u> </u>	\$8,231.75
23c. Subtr	act your monthly e	expenses from your mor	thly income.		
The r	result is your mont	hly net income.		23c. <u> </u>	(\$1,221.65)
4. Do you ex	spect an increase of	or decrease in your exp	enses within the year after you fil	e this form?	
			car loan within the year or do you of a modification to the terms of you		
√ No. ☐ Yes.	None				
	None				

Fill in this information	n to identify your case			
Debtor 1	Robert	Scott	Anderson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	C	entral District of California	
Case number (if known)	6:23-bk-1344	6-SY		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00 \$37,205.00 \$37,205.00
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$22,285.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$4,100.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F Your total liabilities	\$95,073.00 \$121,458.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$7,010.10
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$8,231.75

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Debtor 1

Robert Scott Anderson Case number (if known) 6:23-bk-13446-SY First Name Middle Name Last Name Answer These Questions for Administrative and Statistical Records Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. **√** Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$9.779.39 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$4,100.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$50,930.00 9e.Obligations arising out of a separation agreement or divorce that you did not report as priority \$0.00 claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

\$55,030.00

Fill in this information	to identify your case			
Debtor 1	Robert	Scott	Anderson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	100
United States Bankr	uptcy Court for the:	c	entral District of California	- 33
Case number	6:23-bk-1344	6-SY		
(II KIIOWII)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attor	ney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the sun	nmary and schedules filed with this declaration and that they are true and correct.
X Robert Scott Anderson, Debtor 1	
Date <u>08/14/2023</u> MM/ DD/ YYYY	

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Fill in this information	n to identify your case:			
Debtor 1	Robert	Scott	Anderson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	Ce	entral District of California	<u> </u>
Case number (if known)	6:23-bk-13446	6-SY		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

What is your current	marital status?				
☐ Married					
☑ Not married					
Ouring the last 3 year	s, have you lived anywhe	re other than where you li	ve now?		
√ 1 No					
Yes. List all of the p	places you lived in the last	3 years. Do not include wh	nere you live now.		
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
			☐ Same as Debtor 1		☐ Same as Debtor 1
		From			From
umber Street			Number Street		
		_			-
City	State ZIP Code	_	City	State ZIP Code	-
			Same as Debtor 1		Same as Debtor 1
		_ From			From
umber Street		To	Number Street		To
City	State ZIP Code	_	City	State ZIP Code	_
Vithin the last 8 years	s, did you ever live with a a, California, Idaho, Louisi	spouse or legal equivaler ana, Nevada, New Mexico	nt in a community property , Puerto Rico, Texas, Wasl	state or territory?(Com	munity property states ar
1 No				,	
Yes Make sure vo	u fill out <i>Schedule H</i> - Your	Codebtors (Official Form 1	106H)		

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Anderson Case number (if known) 6:23-bk-13446-SY Debtor 1 Robert Scott Last Name First Name Middle Name Part 2: Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. **☑** No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross Income** Sources of income **Gross Income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ■ Wages, commissions, Wages, commissions, From January 1 of current year until the bonuses, tips bonuses, tips date you filed for bankruptcy: Operating a business Operating a business ■ Wages, commissions, ■ Wages, commissions, For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, Operating a business Operating a business ☐ Wages, commissions, ■ Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2021 YYYY Operating a business Operating a business 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. ✓ Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Gross income from Sources of income **Gross Income from** each source each source Describe below. Describe below. (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the Disability Income \$4,060.00 date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2022

For the calendar year before that: (January 1 to December 31, 2021

Debtor 1	Robe	rt	Scott	Anderson		Case	number (it	known) 6:23-bk-13446-SY
	First N	lame	Middle Name	Last Name				
Part 3: L	ist Certa.	in Paymer	its You Made	Before You Filed	for Bankruptcy			
6. Are eith	er Debtor	l's or Debtor	2's debts prima	rily consumer debts	?			
☐ No.	Neither I	Debtor 1 nor	Debtor 2 has no	imarily consumer d	ehts Consumer deh	ots are defined in 11 U	ISC 8 101	(8) as "incurred by
110 .				family, or household		as are defined in 11 C	.5.6. 9 101	(o) as incurred by
	During th	ne 90 days b	efore you filed fo	or bankruptcy, did yo	u pay any creditor a	total of \$7,575* or mo	re?	
	☐ No. G	So to line 7.						
	☐ Yes.	paid that cr	editor. Do not in		domestic support obl	e in one or more payn igations, such as chil		
	* Subjec	t to adjustme	nt on 4/01/25 an	nd every 3 years afte	r that for cases filed	on or after the date o	f adjustmer	nt.
√ Yes.	Debtor 1	or Debtor 2	or both have pr	imarily consumer d	ebts.			
	During th	ne 90 days b	efore you filed fo	or bankruptcy, did yo	u pay any creditor a	total of \$600 or more	?	
	√ No. G	So to line 7.						
	Yes.	include pay		stic support obligation		nd the total amount yo pport and alimony. Al	•	
				Dates of payment	Total amount pa	id Amount you	still owe	Was this payment for
						·		☐ Mortgage
	Creditor's N	ame		-	-			☐ Car
		anc			_			Credit card
	Number	Street		-				Loan repayment
				-	-			☐ Suppliers or vendors
				_				☐ Other
	City	St	ate ZIP Code					
<i>Insiders</i> in	clude your	relatives; an	y general partne	ers; relatives of any g	eneral partners; part		u are a gen	eral partner; corporations of whi
						ations, such as child		ncluding one for a business you d alimony.
√ No								
Yes.	List all pay	ments to an i	insider.					
				Dates of	Total amount paid	Amount you still	Reason	for this payment
				payment	rotar amount paid	owe	Neason	nor this payment
Insider's	Name							
Number	Street							
City		Stato	7IP Codo					

		Scott	Anderson		_ Case	number (if ki	nown) <u>6:23-bk-13446-SY</u>
	First Name	Middle Name	Last Name				
Within 1 y	ear before you file	d for bankruptcy,	did you make any p	payments or transfer	any property on acc	ount of a dek	ot that benefited an insider?
	ments on debts gua	ranteed or cosigne	ed by an insider.				
√ No							
Yes. Lis	st all payments that	t benefited an insid	der.				
			Dates of	Total amount paid	Amount you still	Reason f	or this payment
			payment		owe	Include cr	reditor's name
Insider's Na	ame						
Number	Street						
City	State	ZIP Code					
st all such	matters, including	ed for bankruptcy, personal injury cas	were you a party in ses, small claims acti	any lawsuit, court actions, divorces, collec	ction, or administrati	ve proceedir ctions, suppo	ng? rt or custody modifications, a
ontract disp	outes.						
√ No							
Yes. Fil	II in the details.						
		Nat	ure of the case	Cou	rt or agency		Status of the case
Cooo titlo			ure of the case	Cou	rt or agency		
Case title			ure of the case	_	rt or agency		Pending
Case title .			ure of the case	_			
			ure of the case	_	Name		Pending On appeal
			ure of the case	Court	Name er Street	ate ZIP Co	Pending On appeal Concluded
Case title .			ure of the case	Court	Name er Street	ate ZIP Co	Pending On appeal Concluded
Case num O. Within 1 heck all tha	nber	led for bankruptcy		Court Numb City	Name er Street		Pending On appeal Concluded
Case num . Within 1 neck all tha	year before you fil at apply and fill in th	led for bankruptcy ne details below.		Court Numb City	Name er Street		Pending On appeal Concluded
Case num . Within 1 neck all tha	year before you fil at apply and fill in the	led for bankruptcy ne details below.	, was any of your p	Court Numb City	Name er Street	ed, attached	Pending On appeal Concluded de
Case num . Within 1 neck all tha	year before you fil at apply and fill in the	led for bankruptcy ne details below.	, was any of your p	Court Numb City	Name er Street		Pending On appeal Concluded de
Case num . Within 1 neck all tha . Yes. Fil	year before you fil at apply and fill in the to line 11.	led for bankruptcy ne details below.	, was any of your p	Court Numb City	Name er Street	ed, attached	Pending On appeal Concluded de
Case num . Within 1 neck all tha . Yes. Fil	year before you fil at apply and fill in the to line 11.	led for bankruptcy ne details below.	, was any of your p	Court Numb City	Name er Street	ed, attached	Pending On appeal Concluded de
Case num D. Within 1 Deck all that No. Go Yes. Fil	year before you fil at apply and fill in the to line 11.	led for bankruptcy ne details below.	v, was any of your property of the Describe	Court Numb City roperty repossessed	Name er Street	ed, attached	Pending On appeal Concluded
Case num . Within 1 neck all tha . Yes. Fil	year before you fil at apply and fill in the to line 11.	led for bankruptcy ne details below.	Describe Explain v	Court Numb City roperty repossessed	Name er Street	ed, attached	Pending On appeal Concluded de
Case num . Within 1 neck all tha . Yes. Fil	year before you fil at apply and fill in the to line 11.	led for bankruptcy ne details below.	Describe	Court Numb City roperty repossessed the property what happened ty was repossessed.	Name er Street	ed, attached	Pending On appeal Concluded de
Case num . Within 1 neck all tha ✓ No. Go ☐ Yes. Fil	year before you fil at apply and fill in the to line 11.	led for bankruptcy ne details below.	Describe Explain v	Court Numb City roperty repossessed	Name er Street	ed, attached	Pending On appeal Concluded de

otor 1	Robert	Scott	Anderson	Case number (if known) 6:23-bk-13446-SY
	First Name	Middle Name	Last Name		
			ey, did any creditor, including a bank or fir	nancial institution, set off any amou	nts from your accounts o
_	ake a payment bed	ause you owed a	debt?		
√ No					
Yes. Fi	ll in the details.				
			Describe the action the creditor took	Date action was	Amount
			Describe the action the creditor took	taken	Amount
Creditor's Na	ame				
			_		
Number	Street				
City	Stat	e ZIP Code	Last 4 digits of account number: XXXX		
			Last 4 digits of account number. AAAA-		
•	eceiver, a custodia	n, or another offic	ial?		
pointed re	eceiver, a custodia	ned for bankruptcy	, was any of your property in the possess ial?	ion or an assignee for the benefit of	i Gieuliois, a Court
√ No					
☐ Yes					
rt 5: Lis	t Certain Gifts	and Contributio	ns		
	Il in the details for o	-	Deparite the ciffe	Detec you gove	Value
per perso	n a total value of m on	iore than \$600	Describe the gifts	Dates you gave the gifts	Value
Person to W	/hom You Gave the 0		-		
			-		
Number	Street		1		
City	S	tate ZIP Code			
Parson's r	elationship to you .				
613011311	elationship to you.				
. Within 2	years before you	filed for bankrupto	y, did you give any gifts or contributions	with a total value of more than \$600	to any charity?
√No		·			, ,
☐ Yes. Fi	ll in the details for o	each gift or contribu	ution.		

or 1	Robert		Last Name		
	First Name	Middle Name	Edot Namo		
	contributions to charitiently the contributions to contributions than \$600	s Describe	what you contributed	Date you contributed	Value
No wite do Nic					
Charity's Na	ame				
umber	Street				
ity	State ZIP C	ode			
6: Lis	st Certain Losses				
Within 1	I vear before you filed fo	r bankruptcy or	since you filed for bankruptcy, did yo	u lose anything because of the	ft. fire. other disaster. or
nbling?	. your bololo you mou i	. Dania aptoy of	onice you mou to burn uptoy, and yo	a roce any aming because or and	, 0, 0 0
No					
Yes. F	ill in the details.				
Describe	e the property you lost a	nd Describe ar	ny insurance coverage for the loss	Date of your loss	Value of property lost
			·		
	loss occurred	Include the	amount that insurance has paid. List p laims on line 33 of Schedule A/B: Prop	ending	
		Include the		ending	
		Include the		ending	
		Include the		ending	
how the		Include the insurance of		ending	
t 7: Lis	st Certain Payments	Include the insurance of or Transfers	laims on line 33 of <i>Schedule A/B: Prop</i>	ending erty.	erty to anyone you consulte
t 7: Lis Within 1 but seeki	st Certain Payments I year before you filed foing bankruptcy or prepare	or Transfers br bankruptcy, did ring a bankruptcy	laims on line 33 of <i>Schedule A/B: Prop</i>	ending erty.	
Within 1 uut seeki uude any	st Certain Payments I year before you filed foing bankruptcy or preparattorneys, bankruptcy p	or Transfers br bankruptcy, did ring a bankruptcy	d you or anyone else acting on your by petition?	ending erty.	
Within 1 uut seeki uude any	st Certain Payments I year before you filed foing bankruptcy or prepare	or Transfers or bankruptcy, did ring a bankruptcetition preparers,	d you or anyone else acting on your be cy petition? or credit counseling agencies for servi	ending lerty. Dehalf pay or transfer any proposes required in your bankruptcy	
Within 1 ut seeki ude any No	st Certain Payments I year before you filed foing bankruptcy or preparattorneys, bankruptcy prill in the details.	or Transfers or bankruptcy, did ring a bankruptcetition preparers,	d you or anyone else acting on your by petition?	ending erty. Dehalf pay or transfer any proposes required in your bankruptcy Date payment or	Amount of payment
Within 1 but seeki ude any No	st Certain Payments I year before you filed foing bankruptcy or preparattorneys, bankruptcy p	or Transfers or bankruptcy, did ring a bankruptcetition preparers,	d you or anyone else acting on your bey petition? or credit counseling agencies for servi	pehalf pay or transfer any properces required in your bankruptcy Tred Date payment or transfer was made	Amount of payment
Within 1 but seeki ude any Yes. Fi 001 Debt erson Wh	st Certain Payments I year before you filed for ing bankruptcy or preparattorneys, bankruptcy profill in the details. torCC Inc. to Was Paid	or Transfers or bankruptcy, did ring a bankruptcetition preparers,	d you or anyone else acting on your bey petition? or credit counseling agencies for servi	ending erty. Dehalf pay or transfer any proposes required in your bankruptcy Date payment or	Amount of payment
Within 1 but seeki ude any Yes. Fi 001 Debt erson Wh	st Certain Payments I year before you filed foing bankruptcy or preparattorneys, bankruptcy prill in the details. torCC Inc. To Was Paid	or Transfers or bankruptcy, did ring a bankruptcetition preparers,	d you or anyone else acting on your bey petition? or credit counseling agencies for servi	pehalf pay or transfer any properces required in your bankruptcy Tred Date payment or transfer was made	Amount of payment
Within 1 but seeki ude any No Yes. Find the work of th	st Certain Payments I year before you filed from the details. It in the details.	or Transfers or bankruptcy, did ring a bankruptcetition preparers,	d you or anyone else acting on your bey petition? or credit counseling agencies for servi	pehalf pay or transfer any properces required in your bankruptcy Tred Date payment or transfer was made	Amount of payment
t 7: Lis Within 1 but seeki lude any No Yes. Fi 001 Debt lerson Wh 378 Sum lumber	st Certain Payments I year before you filed for ing bankruptcy or preparattorneys, bankruptcy profill in the details. torCC Inc. to Was Paid	or Transfers or bankruptcy, did ring a bankruptc etition preparers, Credit cou	d you or anyone else acting on your bey petition? or credit counseling agencies for servi	pehalf pay or transfer any properces required in your bankruptcy Tred Date payment or transfer was made	Amount of payment
t 7: Lis Within 1 but seeki lude any No Yes. Fi 001 Debt lerson Wh 378 Sum lumber Jersey C city debtorcc.	st Certain Payments I year before you filed for the fing bankruptcy or preparationneys, bankruptcy process attorneys, bankruptcy process attorneys attorney	or Transfers or bankruptcy, did ring a bankruptc etition preparers, Credit cou	d you or anyone else acting on your bey petition? or credit counseling agencies for servi	pehalf pay or transfer any properces required in your bankruptcy Tred Date payment or transfer was made	Amount of payment
Within 1 but seeki ude any No Yes. Fi 001 Debt erson Wh 878 Sum umber	st Certain Payments I year before you filed for ing bankruptcy or preparationneys, bankruptcy profill in the details. ItorCC Inc. In Was Paid Inmit Ave Street Street State ZIP C	or Transfers or bankruptcy, did ring a bankruptc etition preparers, Credit cou	d you or anyone else acting on your bey petition? or credit counseling agencies for servi	pehalf pay or transfer any properces required in your bankruptcy Tred Date payment or transfer was made	Amount of payment
t 7: Lis Within 1 but seeki lude any No Yes. Fi On 1 Debt Person Wh 378 Sum Jumber Jersey C City debtorcc. finail or we	st Certain Payments I year before you filed for the fing bankruptcy or preparationneys, bankruptcy process attorneys, bankruptcy process attorneys attorney	or Transfers or bankruptcy, dicring a bankruptcetition preparers, Credit cou	d you or anyone else acting on your bey petition? or credit counseling agencies for servi	pehalf pay or transfer any properces required in your bankruptcy Tred Date payment or transfer was made	Amount of payment

			Anderson		0 400 114111001 (11 11110	wn) 6:23-bk-13446-SY
	First Name	Middle	Name Last Name			
Nexus Ba	ankruptev		Description and value of any proper	ty transferred	Date payment or transfer was made	Amount of payment
	o Was Paid		Attorneys fees and filing fee			
400 D	. 0: 1 "400		, morneye 1000 and ming 100		2/14/2023	\$1,538.00
<u>100 Bayv</u> Number	riew Circle #100 Street					¥ 1,1000100
Number	Street					
Newport I	Beach, CA 92660					
City	State Z	IP Code				
ben@nex	kusbk.com					
	ebsite address					
Person Who	o Made the Payment, if	Not You				
√ No	de any payment or to	ransfer tha	t you listed on line 16.			
			Description and value of any proper	ty transferred	Date payment or transfer was made	Amount of payment
Person Who	o Was Paid				transier was made	
Number	Street					-
Cita	Ctata 7	ID Codo				
City	State Z	IP Code				
3. Within 2 dinary co- clude both o not inclu-	years before you fil urse of your busine	led for ban ss or finan nd transfer	kruptcy, did you sell, trade, or otherv cial affairs? s made as security (such as the granti nave already listed on this statement.			
. Within 2 dinary coollide both onot include	years before you fil urse of your busine	led for ban ss or finan nd transfer	cial affairs? s made as security (such as the granti			
B. Within 2 dinary coolclude both onot include \textsquare \textsq	years before you fi urse of your busine outright transfers and de gifts and transfers	led for ban ss or finan nd transfer	cial affairs? s made as security (such as the granti	ing of a security intere		property).
. Within 2 dinary co clude both o not inclu √ No Yes. Fi	years before you fi urse of your busine outright transfers and de gifts and transfers	led for ban ss or finan nd transfer	cial affairs? s made as security (such as the grantinave already listed on this statement. Description and value of property	ing of a security intere	st or mortgage on your	oroperty). Date transfer was
. Within 2 dinary co clude both o not inclu M No Yes. Fi	years before you fi urse of your busine outright transfers and de gifts and transfers Ill in the details.	led for ban ss or finan nd transfer	cial affairs? s made as security (such as the grantinave already listed on this statement. Description and value of property	ing of a security intere	st or mortgage on your	oroperty). Date transfer was
S. Within 2 dinary co clude both o not inclu M No M Yes. Fi	years before you fi urse of your busine outright transfers and de gifts and transfers Ill in the details.	led for ban ss or finan nd transfer	cial affairs? s made as security (such as the grantinave already listed on this statement. Description and value of property	ing of a security intere	st or mortgage on your	oroperty). Date transfer was
. Within 2 dinary collude both onot include ✓ No ✓ Yes. Fi	years before you filurse of your busine outright transfers and gifts and transfers. Il in the details. Received Transfer	led for ban ss or finan nd transfer s that you l	cial affairs? s made as security (such as the grantinave already listed on this statement. Description and value of property	ing of a security intere	st or mortgage on your	oroperty). Date transfer was
. Within 2 dinary collude both onot include ✓ No ✓ Yes. Fi	years before you filurse of your busine outright transfers and gifts and transfers. Il in the details. Received Transfer	led for ban ss or finan nd transfer	cial affairs? s made as security (such as the grantinave already listed on this statement. Description and value of property	ing of a security intere	st or mortgage on your	oroperty). Date transfer was

Name of trust Comparison of trust		Robert	Scott	Anderson		Case number (if known) 6:	23-bk-13446-SY
These are often called asset-protection devices.) Ves. Fill in the details.		First Name	Middle Name	Last Name			
These are often called asset-protection devices.) Ves. Fill in the details.							
No Yes. Fill in the details. Description and value of the property transferred Date transfer w made				did you transfer any pro	perty to a self-settled trust of	or similar device of which	you are a beneficia
Description and value of the property transferred Date transfer w made Name of trust District transfer w made Date transfer w made Name of trust District transfer w made District transfer w mad	_	nten called asset-p	Totection devices.)				
Name of trust	⊻ No						
Name of trust D. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold r transferred? Clude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pensinds, cooperatives, associations, and other financial institutions. Ves. Fill in the details.	Yes. Fi	II in the details.					
Name of trust Description Comparison			Descripti	on and value of the prop	erty transferred		Date transfer was
List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 0. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold r transferred? 1. Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pensionds, cooperatives, associations, and other financial institutions. 1. Include the cking, savings, money market, or other financial institutions. 1. In the details. 1. Last 4 digits of account number account or instrument closed, sold, moved, or transferred 1. In the details. 1.							made
District Size Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 1. List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 1. List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 1. List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 1. List Certain Financial Financial Financial Counts, Instruments or instruments of the Property of the	Name of to	rust					
D. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold r transferred? clude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pensinds, cooperatives, associations, and other financial institutions. I No Yes. Fill in the details. Last 4 digits of account number I Type of account or closed, sold, moved, or transferred XXXX	ramo or a						
D. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold it transferred? clude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pensinds, cooperatives, associations, and other financial institutions. ✓ No ☐ Yes. Fill in the details. Last 4 digits of account number Type of account or instrument closed, sold, moved, or transferred XXXX-————————————————————————————————							
D. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold r transferred? clude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pensinds, cooperatives, associations, and other financial institutions. I No Yes. Fill in the details. Last 4 digits of account number I Type of account or closed, sold, moved, or transferred XXXX							
O. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold r transferred? nclude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pensunds, cooperatives, associations, and other financial institutions. ✓ No ☐ Yes. Fill in the details. Last 4 digits of account number Type of account or instrument closed, sold, moved, or transferred XXXX- — — — ☐ Checking ☐ Savings ☐ Money market ☐ Brokerage ☐ Other ☐ Other ☐ Other ☐ Other ☐ Other							
r transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pensions, cooperatives, associations, and other financial institutions. Ves. Fill in the details. Last 4 digits of account number Type of account or instrument Date account was closed, sold, moved, or transferred	rt 8: Lis	t Certain Finan	cial Accounts, Ins	truments, Safe Depo	sit Boxes, and Storage	Units	
r transferred? clude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pens ands, cooperatives, associations, and other financial institutions. Ves. Fill in the details.							
clude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pensinds, cooperatives, associations, and other financial institutions. Ves. Fill in the details.			ed for bankruptcy, we	ere any financial account	ts or instruments held in yo	ur name, or for your bene	fit, closed, sold, mo
✓ No ☐ Yes. Fill in the details. Last 4 digits of account number	clude chec	cking, savings, mon			tes of deposit; shares in ban	ks, credit unions, brokerag	je houses, pension
Yes. Fill in the details. Last 4 digits of account number Type of account or instrument Date account was closed, sold, moved, or transferred Last balance before closing transfer		eratives, association	ns, and other financial	institutions.			
Last 4 digits of account number Type of account or instrument Date account was closed, sold, moved, or transferred XXXX- Checking Savings Money market Brokerage Other Other	√ No						
Name of Financial Institution XXXX-	Yes. Fi	II in the details.					
Name of Financial Institution XXXX-			Last 4 d	igits of account number	Type of account or	Date account was	Last balance
Name of Financial Institution XXXX- — — — — Checking Savings Money market Brokerage Other —							
Number Street Street Money market Brokerage Other Other						transferred	transfer
Number Street Savings Money market Brokerage Other	Name of Fir	nancial Institution	XXXX-		Chacking		
Number Street Money market Brokerage Other							
□ Brokerage □ Other □							
Other	 Number	Street			Money market		
	Number	Street					
City State ZIP Code	Number	Street			Brokerage		
•					Brokerage		
	City	State		before you filed for bank	Brokerage	x or other depository for s	securities, cash, or
	City I. Do you raluables?	State		before you filed for bank	☐ Brokerage ☐ Other	x or other depository for s	securities, cash, or
☑ No	City I. Do you raluables?	State :		before you filed for bank	☐ Brokerage ☐ Other	x or other depository for s	securities, cash, or
	City I. Do you ralluables?	State :		before you filed for bank	☐ Brokerage ☐ Other	x or other depository for s	securities, cash, or
✓ No ☐ Yes. Fill in the details. Who else had access to it? Describe the contents Do you still h	City I. Do you raluables?	State :	ou have within 1 year		☐ Brokerage ☐ Other wruptcy, any safe deposit bo		Do you still have
☑ No ☐ Yes. Fill in the details.	City I. Do you raluables?	State :	ou have within 1 year		☐ Brokerage ☐ Other wruptcy, any safe deposit bo		Do you still have
✓ No ☐ Yes. Fill in the details. Who else had access to it? ☐ Describe the contents ☐ No ☐ No	City 1. Do you raluables? 1. No 1. Yes. Fi	State :	ou have within 1 year		☐ Brokerage ☐ Other wruptcy, any safe deposit bo		Do you still have it?
✓ No ☐ Yes. Fill in the details. Who else had access to it? Describe the contents it? Do you still he it?	City 1. Do you raluables? 1. No 1. Yes. Fi	State :	ou have within 1 year		☐ Brokerage ☐ Other wruptcy, any safe deposit bo		Do you still have it?
✓ No ☐ Yes. Fill in the details. Who else had access to it? ☐ Describe the contents ☐ No ☐ No	City 1. Do you raluables? 1. No 1. Yes. Fi	State :	ou have within 1 year		☐ Brokerage ☐ Other wruptcy, any safe deposit bo		Do you still have it?
✓ No ☐ Yes. Fill in the details. Who else had access to it? ☐ Describe the contents ☐ No ☐ No	City 1. Do you raluables? 1. No 1. Yes. File	State now have, or did you	ou have within 1 year Who els	se had access to it?	☐ Brokerage ☐ Other wruptcy, any safe deposit bo		Do you still have it?
✓ No ☐ Yes. Fill in the details. Who else had access to it? Describe the contents it? Name Name Name Name	City I. Do you raluables? I No Yes. Fil	State now have, or did you	ou have within 1 year Who els	se had access to it?	☐ Brokerage ☐ Other wruptcy, any safe deposit bo		Do you still have it?

		Scott	Anderson		known) <u>6:23-bk-13446-SY</u>
	First Name	Middle Name	e Last Name		
2. Have you	stored property i	in a storage unit	or place other than your home within	n 1 year before you filed for bankrupte	cy?
√ No					
Yes. Fill	in the details.				
		W	/ho else has or had access to it?	Describe the contents	Do you still have
					it?
					□No
Name of Stor	rage Facility	Na	me		Yes
Number S	Street	Nu	mber Street		
		Cit	y State ZIP Code		
City	State	ZIP Code			
rt 9: Ider	ntify Property \	You Hold or C	ontrol for Someone Else		
✓ No					
Yes. Fill	in the details.				
		W	here is the property?	Describe the property	Value
			note to the property :		1
Owner's Nam	ne				
Owner's Nam	ne	Nu	mber Street		
	ne Street	Nu	mber Street		
		Nu Cit			
	Street				
Number \$	Street	Cit			
Number 5	Street State	ZIP Code	y State ZIP Code		
Number 5	Street State	ZIP Code			
Number S City Giv	State :	ZIP Code ut Environme	y State ZIP Code		
Number S City City Given the purpose	State Ve Details About	ZIP Code ut Environme	y State ZIP Code ntal Information itions apply:	ning pollution, contamination, releases	of hazardous or toxic
City City Given the purpose Environme substance	State Ve Details About the pental law means ares, wastes, or market.	ZIP Code ut Environme e following definany federal, state terial into the air.	y State ZIP Code Intal Information Itions apply: e, or local statute or regulation concernation, surface water, groundwate	ning pollution, contamination, releases r, or other medium, including statutes o	
Number S City or the purpo Environm substance cleanup c	State State Ve Details About Dose of Part 10, the mental law means are s, wastes, or man of these substances.	ZIP Code ut Environme e following definany federal, state terial into the air. es, wastes, or me	y State ZIP Code Intal Information itions apply: e, or local statute or regulation concern land, soil, surface water, groundwate aterial.	r, or other medium, including statutes of	or regulations controlling the
City	State State Ve Details About Dose of Part 10, the mental law means are s, wastes, or man of these substances.	ZIP Code ut Environme e following definany federal, state terial into the air, es, wastes, or macility, or property	y State ZIP Code Intal Information itions apply: e, or local statute or regulation concern land, soil, surface water, groundwate aterial.		or regulations controlling the
City Tt 10: Giv Fr the purpo Environm substance cleanup c Site mear or utilize i Hazardou	State State Ve Details About Dose of Part 10, the mental law means area, wastes, or man of these substance and no cation, fait, including disposats material means are substance as any location, fait, including disposats material means	ZIP Code ut Environme e following definences, wastes, or macility, or property sal sites. e anything an enverse anything an enverse control of the control	y State ZIP Code ntal Information itions apply: e, or local statute or regulation concern land, soil, surface water, groundwate aterial. y as defined under any environmental	r, or other medium, including statutes of	or regulations controlling the tutilize it or used to own, operated
City Tt 10: Given the purport the purport substance cleanup of the mean or utilize in the purport of the purport	State Ve Details About the sental law means are substance and any location, fait, including dispositis material means contaminant, or sental	ZIP Code ut Environme e following define any federal, state terial into the aires, wastes, or macility, or property sal sites. a anything an envisimilar term.	y State ZIP Code Intal Information itions apply: e, or local statute or regulation concern, land, soil, surface water, groundwate aterial. y as defined under any environmental vironmental law defines as a hazardou	aw, whether you now own, operate, or swaste, hazardous substance, toxic s	or regulations controlling the tutilize it or used to own, operate
City Tt 10: Giv Environm substance cleanup coulstance or utilize in Hazardou pollutant, eport all not	State State Ve Details About Dose of Part 10, the mental law means are substance in sany location, fare it, including dispositus material means contaminant, or stices, releases, are	ZIP Code ut Environme e following defin any federal, state terial into the air es, wastes, or macility, or property sal sites. e anything an environment proceedings	y State ZIP Code Intal Information itions apply: e, or local statute or regulation concern, land, soil, surface water, groundwate aterial. v as defined under any environmental vironmental law defines as a hazardouthat you know about, regardless of water in the content of th	aw, whether you now own, operate, or swaste, hazardous substance, toxic swhen they occurred.	or regulations controlling the utilize it or used to own, operaubstance, hazardous material
City Or the purpo Environm substance cleanup of Site mean or utilize i Hazardou pollutant, eport all not	State State Ve Details About Dose of Part 10, the mental law means are substance in sany location, fare it, including dispositus material means contaminant, or stices, releases, are	ZIP Code ut Environme e following defin any federal, state terial into the air es, wastes, or macility, or property sal sites. e anything an environment proceedings	y State ZIP Code Intal Information itions apply: e, or local statute or regulation concern, land, soil, surface water, groundwate aterial. v as defined under any environmental vironmental law defines as a hazardouthat you know about, regardless of water in the content of th	aw, whether you now own, operate, or swaste, hazardous substance, toxic s	or regulations controlling the utilize it or used to own, operaubstance, hazardous material,
City City Or the purport Environment substance cleanup of Site mean or utilize in Hazardou pollutant, eport all not 4. Has any g	State State Ve Details About Dose of Part 10, the mental law means are substance in sany location, fare it, including dispositus material means contaminant, or stices, releases, are	ZIP Code ut Environme e following defin any federal, state terial into the air es, wastes, or macility, or property sal sites. e anything an environment proceedings	y State ZIP Code Intal Information itions apply: e, or local statute or regulation concern, land, soil, surface water, groundwate aterial. v as defined under any environmental vironmental law defines as a hazardouthat you know about, regardless of water in the content of th	aw, whether you now own, operate, or swaste, hazardous substance, toxic swhen they occurred.	or regulations controlling the utilize it or used to own, operaubstance, hazardous material,

	Robert	Scott	Anderson		Case number (if kno	wn) 6:23-bk-13446-SY
	First Name	Middle	Name Last Name			
			Governmental unit	Environment	al law, if you know it	Date of notice
Name of si	te		Governmental unit			
Number	Street		Number Street			
			City State ZI	P Code		
City	State	ZIP Code				
	ou notified any gove	ernmental u	nit of any release of hazaro	dous material?		
√ No						
_ Yes. F	ill in the details.					
			Governmental unit	Environment	al law, if you know it	Date of notice
Nama of al	4-		O			
Name of si	te		Governmental unit			
Number	Street		Number Street			
			City State ZI	P Code		
	State	ZIP Code				
City						
City						
	ou been a party in a	ny judicial c	r administrative proceedii	ng under any environmenta	al law? Include settlements a	and orders.
6. Have yo	ou been a party in a	ny judicial c	r administrative proceedii	ng under any environmenta	al law? Include settlements a	and orders.
. Have yo ✓ No	ou been a party in a	ny judicial c	or administrative proceedii	ng under any environmenta	al law? Include settlements a	and orders.
. Have yo ✓ No		ny judicial c	or administrative proceeding the control of agency	ng under any environmenta Nature of the		
i. Have yo ☑ No ☐ Yes. F	ill in the details.		Court or agency			Status of the ca
√No	ill in the details.					Status of the ca

Case number

City

State

ZIP Code

otor 1	Robert	Scott	Anderson	Case number (if known) 6:23-bk-13446-SY
	First Name	Middle Name	Last Name	
art 11: G	Sive Details Abou	ut Your Business	or Connections to Any Busin	ness
7 Within 4	l vears before you f	iled for hankruntcy	did vou own a husiness or have a	ny of the following connections to any business?
_			de, profession, or other activity, eith	
			LC) or limited liability partnership (I	·
_			LC) or ilmited liability partnership (i	LLP)
	partner in a partner			
		managing executive	·	
□ A	n owner of at least 5	5% of the voting or ed	quity securities of a corporation	
☑ No. No	one of the above app	plies. Go to Part 12.		
Yes. C	check all that apply a	above and fill in the d	etails below for each business.	
		Descri	ibe the nature of the business	Employer Identification number
Name				Do not include Social Security number or ITIN.
				EIN:
Number	Street			5
		Name	of accountant or bookkeeper	Dates business existed
				From To
City	State	ZIP Code		
			did you give a financial statemen	to anyone about your business? Include all financial institutio
reditors, o	or other parties.	iled for bankruptcy,		
editors, o	or other parties.	ned for bankruptcy,		
reditors, o	or other parties.			
reditors, o	or other parties.			
reditors, o	or other parties.	w.		
reditors, o	or other parties.	w.	ssued	
reditors, o	or other parties.	w. Date is	ssued	

City

State

ZIP Code

Debtor 1

 Robert
 Scott
 Anderson
 Case number (if known)
 6:23-bk-13446-SY

 First Name
 Middle Name
 Last Name

Part 12: Sign Below	
I have read the answers on this <i>Statement of Financial Affair</i> s and any attachments, and I de and correct. I understand that making a false statement, concealing property, or obtaining metankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or be	noney or property by fraud in connection with a
Signature of Robert Scott Anderson, Debtor 1	
Date <u>08/14/2023</u>	
Did you attach additional pages to your Statement of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
☑ No ☐ Yes	
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy ✓ No	forms?
Yes. Name of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information	to identify your case	:		
Debtor 1	Robert	Scott	Anderson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	ruptcy Court for the:	C	entral District of California	
Case number (if known)	6:23-bk-1344	6-SY		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Irt 1: List You	ur Creditors Who Have Secured Clair	ms	
For any creditor below.	rs that you listed in Part 1 of Schedule D: C	reditors Who Have Claims Secured by Property (Official For	m 106D), fill in the information
Identify the cre	editor and the property that is collateral	What do you intend to do with the property that secure a debt?	es Did you claim the property as exempt on Schedule C?
Creditor's		☐ Surrender the property.	☑ No
name:	SchoolsFirst FCU	Retain the property and redeem it.	Yes
Description of property securing debt:	2022 Honda Civic	Retain the property and enter into a Reaffirmation Agreement.	
		Retain the property and [explain]:	
Creditor's		☐ Surrender the property.	☑ No
name:	Westlake Financial Services	Retain the property and redeem it.	Yes
Description of property	2022 Honda Civic	Retain the property and enter into a Reaffirmation Agreement.	
cooding dobt.		Retain the property and [explain]:	
Description of		Retain the property and enter into a Reaffirmation Agreement.	☐ Yes

Debtor 1 Robert Scott Anderson Case number (if known) 6:23-bk-13446-SY
First Name Middle Name Last Name

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Lease information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease per unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Lessor's name: Description of leased	
Lessor's name:	☐ No
Description of leased	☐ Yes
property:	
Lessor's name:	☐ No
Description of leased property:	☐ Yes
Lessor's name:	☐ No
Description of leased property:	☐ Yes
Lessor's name:	☐ No
Description of leased property:	☐ Yes
Lessor's name:	☐ No
Description of leased property:	☐ Yes
Lessor's name:	☐ No
Description of leased property:	☐ Yes
Lessar's name:	☐ No
Description of leased property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secure property that is subject to an unexpired lease. X Signature of Debtor 1 Date 08/14/2023 MM/ DD/ YYYY	ures a debt and any personal

	Case	6.22 blv 12		O Filad	00/14/2) En		00/1///22 Chask are be	22:20:12 Dog	is form and in
Fill	in this information	to identify your ca	se:				50	Form 122A-1	ox only as directed in th Supp:	is ioim and in
D	ebtor 1	Robert First Name	Scott Middle Name	Anderson Last Name				☑1. There is	no presumption of abu	use.
_	-h-1 0	i iist ivaille	Wildule Name	Last Name				☐2. The cald	culation to determine if	a presumption
_	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name				of abuse a	pplies will be made und st Calculation (Official F	der <i>Chapter</i> 7
U	nited States Bankru	iptcy Court for the	.: <u>Ce</u>	entral District o	f California		-		ans Test does not apply I military service but it o	
_	ase number _ known)	6:23-bk-13	446-SY						<u> </u>	
(11	Kilowii)							☐ Check if the	nis is an amended filing	ł
Of	ficial Form	122A-1								
Cł	napter 7.5	——— Statemer	nt of Your	Curren	t Mont	hlv I	ncoi	me		12/19
									ing accurate. If more s	
attad and beca with	ch a separate shee case number (if kn ause of qualifying r this form.	t to this form. Inc nown). If you belic military service, c	lude the line number eve that you are exen complete and file Stat	to which the another the representation to the second seco	additional information	ormation of abuse I	applies. because	On the top of you do not ha	any additional pages, ave primarily consume 707(b)(2) (Official Forn	write your name er debts or
			Monthly Income							
1.	What is your mari Not married. F		us? Check one only.							
	_		ines 2-11. i g with you. Fill out bo	oth Columns A	and B lines	9 ₋11				
			T filing with you. You			2-11.				
			old and are not legall			olumn A a	and B, lin	nes 2-11.		
	Living sep under per	arately or are leg	ally separated. Fill of	ut Column A, li se are legally s	nes 2-11; do eparated und	not fill out ler nonbar	Column	B. By checkir law that applie	ng this box, you declare es or that you and your 17(b)(7)(B).	
10 va ex	01(10A). For examparied during the 6 m	ole, if you are filing nonths, add the ind	g on September 15, the come for all 6 months	ne 6-month per and divide the	riod would be total by 6. F	March 1 till in the re	through <i>i</i> esult. Do	August 31. If the not include an	ile this bankruptcy cas ne amount of your mon ny income amount more ve nothing to report for	thly income than once. For
							Colur Debto		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages deductions).	s, salary, tips, bor	nuses, overtime, and	commissions	(before all pa	ayroll		\$9,102.72		
3.	Alimony and mair is filled in.	ntenance paymer	nts. Do not include pa	yments from a	spouse if Co	lumn B		\$0.00		
4.	your dependents, unmarried partner	, including child s , members of you de regular contribu	h are regularly paid f support. Include regul r household, your dep utions from a spouse line 3.	lar contribution pendents, pare	s from an nts, and			\$0.00		
5.	Net income from or farm	operating a busir	less, profession,	Debtor 1	Debtor 2					
	Gross receipts (be	efore all deduction	s)	\$0.00						
	Ordinary and nece	essary operating e	expenses	- \$0.00	-					
	Net monthly incom	ne from a busines	s, profession, or farm	\$0.00		Copy here		Ф0.00		
_						\rightarrow		\$0.00		
6.	Net income from			Debtor 1	Debtor 2					
	Gross receipts (be		•	\$0.00						
	Ordinary and nece	essary operating e	expenses	- \$0.00						
	Net monthly incom	ne from rental or o	other real property	\$0.00		Copy here				
						\rightarrow		\$0.00		
7.	Interest, dividend	s, and royalties						\$0.00		

De	btor 1 Case 6:23-bk-13446-SY I Robert Scott First Name Middle Name	Doc 8 Filed 08/14/23 Main Document Page	Entered 08/14/2: 4 5 of 50	3 22:30:13 De nber (if known) 6:23-bk-	SC 13446-SY
	That Name Whole Name	Last Name	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	8. Unemployment compensation		\$676.67		
	Do not enter the amount if you contend that the under	amount received was a benefit			
	the Social Security Act. Instead, list it here:				
	For you	\$0.00			
	For your spouse	<u> </u>			
	 Pension or retirement income. Do not include a benefit under the Social Security Act. Also, exced not include any compensation, pension, pay, United States Government in connection with a disability, or death of a member of the uniformer retired pay paid under chapter 61 of title 10, the that it does not exceed the amount of retired pay entitled if retired under any provision of title 10 of 10. Income from all other sources not listed above Do not include any benefits received under the received as a victim of a war crime, a crime ag domestic terrorism; or compensation, pension, the United States Government in connection we injury or disability, or death of a member of the list other sources on a separate page and put to 	ept as stated in the next sentence, annuity, or allowance paid by the disability, combat-related injury or d services. If you received any in include that pay only to the extent y to which you would otherwise be other than chapter 61 of that title. Ye. Specify the source and amount. It is social Security Act; payments a lainst humanity, or international or pay, annuity, or allowance paid by with a disability, combat-related uniformed services. If necessary,	\$0.00		
	Total amounts from separate pages, if any.		+	+	
	11. Calculate your total current monthly income. each column. Then add the total for Column A		\$9,779.39	+	= \$9,779.39 Total current monthly income
Pa	art 2: Determine Whether the Means Test A	applies to You			montally income
12.	Calculate your current monthly income for the year	Follow these steps:			
	12a. Copy your total current monthly income from lir	ne 11		Copy line 11 here →	\$9,779.39
	Multiply by 12 (the number of months in a year	·).			x 12
	12b. The result is your annual income for this part of	f the form.		12b.	\$117,352.68
13.	Calculate the median family income that applies to	you. Follow these steps:			
	Fill in the state in which you live.	California			
	Fill in the number of people in your household.	4			
	Fill in the median family income for your state and siz To find a list of applicable median income amounts, g instructions for this form. This list may also be available	o online using the link specified in the	separate	13. [\$122,707.00
	How do the lines compare?				
	14a. Line 12b is less than or equal to line 13. On t Go to Part 3. Do NOT fill out or file Official Fo	the top of page 1, check box 1, <i>There</i> orm 122A-2.	is no presumption of abu	ise.	

14b. Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.*Go to Part 3 and fill out Form 122A-2.

Debtor 1

Case 6:23-bk-13446-SY Doc 8 Filed 08/14/23 Entered 08/14/23 22:30:13 Desc Robert Scott Main 19858 Phent Page 46 of 50 Case number (if known) 6:23-bk-13446-SY Middle Name

Part 3: Sign Below

By signing here/I deplare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Signature of Debtor 1

Date 08/14/2023

MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Case 6:23-bk-13446-SY Doc 8 Filed 08/14/23 Entered 08/14/23 22:30:13 Desc Robert Sirst Name Main Desc Main Desc Last Name Last

Current Monthly Income Details for the Debtor(s)

Debtor 1 Income Details: Income for the Period 01/01/2023 to 07/01/2023.

Employment Income

Source of Income: California Department of Corrections

Year-to-Date Income:

Deductions \$0.00 \$0.00 12/31/2022 Starting Year-to-Date Income: \$0.00 06/30/2023 Ending Year-to-Date Income: \$54,616.29 \$23,611.92 \$31,004.37 Income for six-month period (Ending-Starting): \$54,616.29 \$23,611.92 \$31,004.37 Average per month: \$9,102.72 \$3,935.32 \$5,167.40

Income by Month:

	Date	Income	Deductions	Net
6 Months ago	01/2023	\$9,102.72	\$3,935.32	\$5,167.40
5 Months ago	02/2023	\$9,102.72	\$3,935.32	\$5,167.40
4 Months ago	03/2023	\$9,102.72	\$3,935.32	\$5,167.40
3 Months ago	04/2023	\$9,102.72	\$3,935.32	\$5,167.40
2 Months ago	05/2023	\$9,102.72	\$3,935.32	\$5,167.40
Last Month	06/2023	\$9,102.72	\$3,935.32	\$5,167.40
	Average per month:	\$9,102.72	\$3,935.32	\$5,167.40

Disability Income

Source of Income: Disability Income

Income by Month:

	<u>Date</u>	Income
6 Months ago	01/2023	\$580.00
5 Months ago	02/2023	\$1,160.00
4 Months ago	03/2023	\$1,740.00
3 Months ago	04/2023	\$580.00
2 Months ago	05/2023	\$0.00
Last Month	06/2023	\$0.00
	Average per month:	\$676.67

Main Document Page 48 of 50

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Central District of California

In re	,	Anderson, Robert	Scott							
						Case No.	6:23-bk-134	46-SY		
Debto	Debtor				Chapter			7		
			DISCLOSURE (OF COMPEN	ISATION OF A	TTORNE	Y FOR DEE	BTOR		
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:									
	For legal services, I have agreed to accept							\$1,200.00		
	Prior to the filing of this statement I have received							\$1,200.00		
	Bal	ance Due							\$0.00	
2.	The	The source of the compensation paid to me was:								
	√	Debtor	Other (specify)							
3.	The	The source of compensation to be paid to me is:								
	√	Debtor	Other (specify)							
4.	☑ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.									
	☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.									
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:									
	a.	Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;								
	b.	Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;								
	C.	Representation	of the debtor at the m	meeting of credite	ors and confirmati	ion hearing,	and any adjou	ırned hearin	gs thereof;	
6.	Ву	agreement with th	ne debtor(s), the abov	ve-disclosed fee	does not include t	the following	services:			

B2030 (Form 2030) (12/15)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

08/14/2023

/s/Benjamin Heston

Date

Benjamin Heston
Signature of Attorney

Bar Number: 297798 Nexus Bankruptcy 100 Bayview Circle #100 Newport Beach, CA 92660 Phone: (951) 290-2827

Nexus Bankruptcy

Name of law firm

STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any co-partnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

In re Robert Scott Anderson; Case number 6:14-bk-17838-SC; Filed 6/17/2014; Chapter 7; Judge Scott C. Clarkson; Central District of California, Riverside Division; Status: Discharged; Closed 9/30/2014; Case did not involve real property.

In re Robert Scott Anderson; Case number 6:23-bk-12048-SY; Filed 5/16/2023; Chapter 7; Judge Scott H. Yun; Central District of California, Riverside Division; Status: Dismissed; Closed 7/21/2023; Case did not involve real property.

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

None

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

None

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

None

I declare under penalty of perjury that the foregoing is true and correct.

Executed at Ontario, California.

Date: August 14, 2023

Signature of Deptor 1

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